



HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809

TEL.: 587-0460 FAX: 587-0470



RECLIPED

LOBBYIST REGISTRATION FORM

'03 JAN 14 911:25

| (See back of this form for instructions) | | | | |
|---|----------------------------|---|---|--|
| (Type or Print Clearly) | | STATE CENTRALA LTATE ETHIOS COMMISSION | | |
| PART I LOBBYIST NAME(Last) (First) | | | | |
| DAVIDSON, Orlando R. | (Mi | ddie) | TELEPHONE | |
| MAILING ADDRESS (Street) | | | 521-4717 | |
| 700 Bishop St., #1928 | (City) Honolulu | (State) | (Zip Code) | |
| | | | 6813 | |
| EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE | | | | |
| MAILING ADDRESS (Street) | (Cia.) | | | |
| (Sireet) | (City) | (State) | (Zip Code) | |
| | | | | |
| PART II ORGANIZATION | | | | |
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbrev | viate) | | TELEPHONE | |
| Land Use Research Foundation of | Hawaii | | 521-4717 | |
| MAILING ADDRESS (Street) | (City) | (State) | (Zip Code) | |
| 700 Bishop St., #1928 | Honolulu | HI 9 | 6813 | |
| NAME OF PERSON RESPONSIBLE FOR PREPARING ORGA | ANIZATION'S EXPENDITURE | S STATEMENT | TELEPHONE | |
| Orlando R. Davidson | | | 521-4717 | |
| MAILING ADDRESS (Street) | (City) | (State) | (Zip Code) | |
| 700 Bishop St., #1928 | Honolulu | HI 9 | 6813 | |
| | | | | |
| PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY | | | | |
| X Agriculture Education | Human Se | rvices | Science, Technology & Economic Development | |
| Communications & X Government Oper Public Utilities Finance | rations & X Intergover | nmental Relations, 🏻 🛣 | Tourism & Recreation | |
| Consumer Protection & X Hawaiian Affairs Commerce | Labor & Er | mployment X | Transportaion | |
| Culture, Arts, Historic Health Preservation | X Planning, L Use Mana | and & Water gement | Other: (indicate below) | |
| X Ecology, Energy, X Housing Environmental Protection | Public Safe | ety & Corrections | | |
| | | | | |
| PART IV CERTIFICATION OF LOBBYIST | | | | |
| I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete. | | | | |
| Oshow I alle | | Jan . 6, 20 | 201 | |
| (Signature of Lobbyist) | |) (Da | (e) | |
| PART V AUTHORIZATION TO LOBBY | | | | |
| NAME Harry Saunders | TITLE OF AUTH President | ORIZING OFFICER OR PE | ERSON REPRESENTED | |
| NAME OF ORGANIZATION (if applicable) | | · · · · · · · · · · · · · · · · · · · | TELEPHONE | |
| Land Use Research Foundation o | of Hawaii | | 521-4717 | |
| MAILING ADDRESS (Street) | (City) | (State) | (Zip Code) | |
| 700 Eishop St., #1928 | Honolulu | HI | 96813 | |
| I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned. | | | | |
| JAN 1 3 2003 | | | | |
| (Signature of Authorizing Officer or Person F | Represented) | | | |